PÂTENT APPLICATION FEE DETERMINATION RECORD										oplication or Docket Number			
Effective October 1, 2000									12078-139				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			57					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			57 minus 20=		. 37			X\$ 9=		OR	X\$18=	666	
INDEPENDENT CLAIMS			minus 3 =		5			X40=		OR	X80=	400	
MUI	TIPLE DEPEN	DENT CLAIM PR	RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	·	OR	TOTAL	1774	
/CLAIMS AS AMENDED - PART II										,	OTHER		
1	120105	(Column 1)		(Colu	mn 2)) (Column 3)		SMALLE		OR	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	. 82	Minus	 5	7	-85		X\$ 9=		OR	X\$18=	\$1250	
	Independent	. 8	Minus	•••	8_	=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
								TOTAL		OR	TOTAL ADDIT. FEE		
٠		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDIT. FEE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER NOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	<u> -</u>	Minus	•••	= 01 010	<u> -</u>		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)			ımn 2) HEST	(Column 3)					٠.		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	ï	
	Independent	•	Minus	•••		<u> </u> =	1	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+135=		1	+270=		
• 1	° If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	TOTAL		
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
	The "Highest Nur	nber Previously Pa	ud For (Total o	er Indepen	igeni) is th	e riignest numb	er 10	rrug tu ne sb	propriate bo	ux in C	oumn 1.		
FORM	PTO-875						Do	test and Tondar	mark Office 1	e DE	PARTMENT C	F COMMERCE	

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